

Follow These Steps
to Register Your Child
for a
Drive4Success
After-School Program

Sigue estos pasos
para registrar a su hijo para
Drive4Success
Despues del programa escolar

Step 1

- The web address to begin is:
<https://www.thefirstteetriangle.org/>



La dirección web para comenzar es: <https://www.thefirstteetriangle.org/>

Programas

Step 2

PROGRAMS

DRIVE4SUCCESS AFTER SCHOOL PROGRAMS

Home | Programs | Home4Success After School Programs

SHARE OUR SITE

CLICK HERE TO REGISTER FOR AN AFTER-SCHOOL PROGRAM!

Select 2018 Drive4Success Fall Session 1 click register, create an account, and begin the registration process. If applying for a scholarship, please select "Yes" when asked about Financial Aid.

DRIVE4SUCCESS AFTER SCHOOL PARTNERS

ELEMENTARY SUPPORT MODEL SCHOOLS:

- Balwell Road
- Beverwood Road
- Burgo
- Creesh Road
- East Garner
- Fox Road
- Hindge Road
- Lincoln Heights
- Lynn Road
- Smith
- Walnut Creek
- Webster

Pulse aquí para registrarse para el programa después de la escuela

Step 3

The title will always include *Drive4Success*, but the year, season (Fall/Spring), and session number (1/2) will change.

CURRICULUM AND EVENTS

SHOW ME:

Curriculum Events

Show 10 entries

Search

Date	Name	Location	Type
	2018 Drive4Success Fall Session 1		Curriculum
01/01/2016 - 12/31/2016	2018 After-School Programs		Curriculum
08/12/2018 - 12/31/2018	2018 Governors Club Mentor Program	11000 Governors Drive, Chapel Hill, NC, 27517, United States	Curriculum
06/23/2018 - 08/11/2018	2018 Triangle Cup		Curriculum
07/16/2018 - 09/01/2018	2018 Session 3		Curriculum

2018 Drive4Success sesión de otoño1

Step 4

The screenshot shows a registration page for '2018 Drive4Success Fall Session 1'. The page features the logo for 'The First Tee Triangle' and 'Drive 4 Success'. Below the logo are two buttons: 'VIEW MORE INFO' and 'REGISTER'. The 'REGISTER' button is circled in black. The page is part of a list of items, with a table at the bottom showing dates and session names.

Type	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum
Curriculum	Curriculum

Date	Session Name
018-09/01/2018	2018 Session 3
018-09/09/2018	2018 YMCA Camp Sea Gull Trip

registro

Step 5

If this is the first time you are registering your child, Create An Account, then Log In.

Please Log In or Create an Account

LOG IN

Email Address

Password

Show Password

Forgot password?

LOG IN

CREATE AN ACCOUNT

First Name

Last Name

Email Address

Password

Confirm Password

Show Password

Are you a Military Family?

I'm not a robot



CREATE ACCOUNT

Crea una cuenta

nombre de pila / apellido / dirección de correo electrónico / contraseña / Confirmar contraseña / mostrar contraseña / eres una familia militar / No soy un robot / crear una cuenta

Step 6

Once you have created an account, then you can Log In.

Please Log In or Create an Account

LOG IN

Email Address

Password

Show Password

Forgot password?

LOG IN

CREATE AN ACCOUNT

First Name

Last Name

Email Address

Password

Confirm Password

Show Password
Are you a Member Family?

I'm not a robot



CREATE ACCOUNT

Por favor, regístrese o cree una cuenta

iniciar sesión / dirección de correo electrónico / mostrar contraseña / Se te olvidó tu contraseña / iniciar sesión

Step 7

If this is your first time registering, you will have to Add a Participant. From then on, you just choose your child's name from the drop down menu.

CURRICULUM AND EVENTS

SHOW ME: Curriculum Events

FOR PARTICIPANT
Choose One
Choose One
ADD PARTICIPANT

PROGRAM LEVEL: PLATER Par Gold Eagle ...

Show 10 entries

Date Name Location Type

	2018 Drived Success Pass Session 1		Curriculum
01-01-2018 - 12-31-2018	2018 After-School Programs		Curriculum
04-11-2018 - 12-31-2018	2018 Governors Club Mentor Program	11000 Governors Drive Chapel Hill, NC, 27517 United States	Curriculum
04-25-2018 - 08-11-2018	2018 Thangla Cup		Curriculum
07-16-2018 - 09-01-2018	2018 Session 3		Curriculum
09-07-2018 - 09-09-2018	2018 YMCA Camp Sea Gull Trip		Curriculum
09-17-2018 - 11-03-2018	2018 Session 4		Curriculum

1 ...

Plan de Estudios y Eventos

para el participante / elige uno / agregar un participante

Step 8

LUM AND EVENTS

Add a new participant

First Name * Last Name *

Date of Birth * Gender *

[7/20/2015] None

Grade Level * Ethnicity *

None None

Are you a Military Family? *

Yes No

CANCEL ADD PARTICIPANT

Agregar un nuevo participante

nombre de pila / apellido / fecha de nacimiento / género / nivel de grado / etnicidad / eres una familia militar / añade participante

Step 9

Show 10 entries

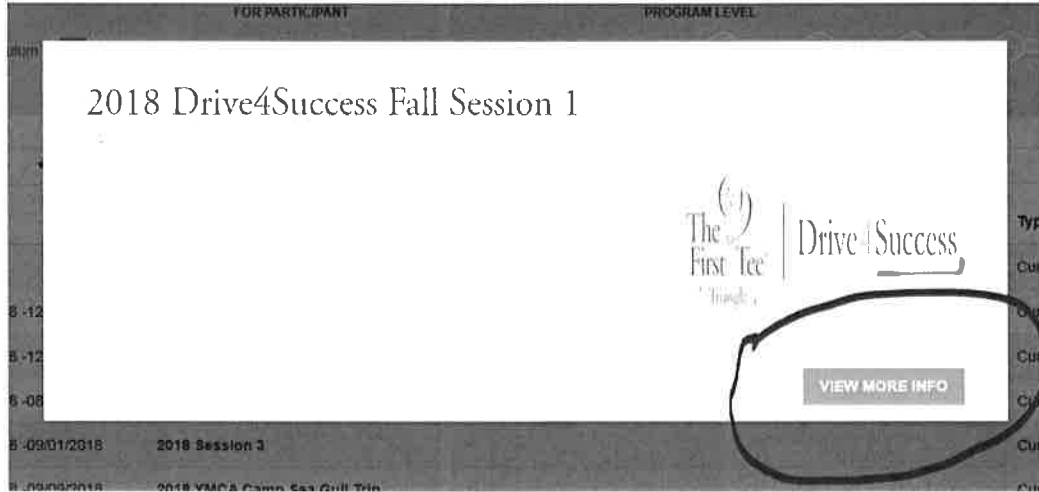
Search:

Date	Name	Location	Type
	2018 Drive4Success Fall Session 1		Curriculum
01/01/2018 -12/31/2018	2018 After-School Programs		Curriculum
04/12/2018 -12/31/2018	2018 Governors Club Mentor Program	11000 Governors Drive, Chapel Hill, NC, 27517, United States	Curriculum
06/23/2018 -08/11/2018	2018 Triangle Cup		Curriculum
07/16/2018 -09/01/2018	2018 Session 3		Curriculum
09/07/2018 -09/09/2018	2018 YMCA Camp Sea Gull Trip		Curriculum
09/17/2018 -11/03/2018	2018 Session 4		Curriculum

Page 1 of 1

2018 Drive4Success sesión de otoño1

Step 10



conducir para la sesión de éxito uno / para ver más información

Step 11

Be sure to scroll through the entire list and choose the school in which your child is enrolled.

WILBURN FALL 2018 SESSION 1

DATE: August 27,
2018 to September 24, 2018
TIME: 03:45:00 PM to 03:45:00 PM
LOCATION:
PROGRAM: TARGET Registered
LEVEL:
AGE: 6 and up
RESTRICTIONS: TARGET Registered PLAYEr
PLAYEr Certified



 32 days left to register

Asegúrese de desplazarse por la lista completa y elegir la escuela en la que está inscrito su hijo. / añadir a la cesta

Step 12

You have 1 session in your cart

PROCEED TO CHECKOUT

proceder a la caja

Step 13

< CURRICULUM AND EVENTS

< ADD A PARTICIPANT

EVENT REGISTRATION

SESSIONS	CONTACT INFO	PARTICIPANT QUESTIONS	FINANCIAL AID	WAIVERS	SUMMARY	CONFIRMATION
Participant	Program	Program Dates	Price	Discounts		
██████████	Walburn Fall 2016 Session 1	08/27/2016 - 09/24/2016	██████████	\$0.00		×

CANCEL

CONTINUE >

continuar

Step 14

YOU are the Emergency Contact. This is not like other forms on which the emergency contact is a grandparent or aunt.

Participant Contact Info

Participant Contact Info

First Name * Last Name * Date of Birth *

Street * [7/10/2018]

Grade Level * 1

City * State * Zip *

Gender * None

Home Phone Mobile Phone Ethnicity * None

Allergies

Email Address * Home Phone Preferred * None

Emergency Contact: Disabilities

One emergency contact per participant

Full Name * Relationship to participant * Dietary Restrictions

Phone Number * Email Address *

USTED es el contacto de emergencia. Esto no es como otras formas en las que el contacto de emergencia es un abuelo o tía.

Información de Contacto del Participante

nombre de pila / apellido / fecha de nacimiento / calle / nivel de grado / ciudad / estado / código postal / género / etnicidad / alergias / dirección de correo electrónico /

Contacto de Emergencia

nombre completo / relación de participante / discapacidades / número de teléfono / Restricciones de la dieta

Step 15

Event specific information

SR-340632 - Wilburn Fall 2016 Session 1

What is the participant's shirt size? *

None

What school is the child you're registering currently enrolled in? *

Please provide the name and relationship of any person(s), other than parents/guardians, who may pick up your child from class. *

Is the participant on an Individualized Education Plan at school? If "Yes" please contact the chapter so that we can provide appropriate care for the participant's enjoyment of the program. *

Yes No

BACK

CONTINUE >

Talla de camisa / Nombre de escuela / quién puede recoger a su hijo de la clase / es el participante en un plan de educación individualizado en la escuela / continuar

Step 16

If you select "No," you will eventually reach a screen on which you can enter your credit card information.

If you select "Yes," you will receive an email that your application was *submitted*, once you complete the next screen. You will then receive another email once your application has been *approved*.

< CURRICULUM AND EVENTS < ADD A PARTICIPANT

EVENT REGISTRATION

SESSIONS CONTACT INFO PARTICIPANT QUESTIONS **FINANCIAL AID** WAIVERS SUMMARY CONFIRMATION

Financial Aid

We offer financial aid to students if your family has a low or fixed income or if you are a first-generation college student. Families who are eligible are notified via email after school data is processed. Please contact your counselor for more information.

Would you like to apply?

No Yes

BACK CONTINUE >

Si selecciona "No", eventualmente llegará a una pantalla en la que puede ingresar la información de su tarjeta de crédito.

Si selecciona "Sí", recibirá un correo electrónico donde se envió su solicitud, una vez que complete la siguiente pantalla. A continuación, recibirá otro correo electrónico una vez que su solicitud haya sido aprobada.

Ayuda Financiera

te gustaría aplicar / continuar

Step 17

In the field marked
"How much are you
able to pay (if any)?,"
enter \$0.

Financial Aid

We may have financial aid available if your family has a special financial need or hardship. Families receiving Free or reduced lunch at school may also qualify. If you need more information please contact the chapter.

Would you like to apply?

- No
 Yes

Thank you for your interest in financial aid. To submit your application and hold your seat(s) in the session(s) it is important to Click "Continue" and complete the full registration process. This includes clicking "Submit Registration" on the final page. At that time, your application will be submitted to the chapter for review and you will receive notification of the outcome via email in 3-5 business days.

What is your household income range?*

--None--

How many people are in your household? *

Are you receiving free or reduced lunch?*

--None--

How much are you able to pay (if any)?*

\$

Are you experiencing a financial hardship?*

--None--

BACK

CONTINUE >

Ayuda financiera

Podemos tener ayuda financiera disponible si su familia tiene una necesidad financiera especial o dificultades. Las familias que reciben almuerzo gratis o reducido en la escuela también pueden calificar. Si necesita más información, póngase en contacto con el capítulo

¿Cuál es su ingreso familiar? / ¿cuántas personas hay en su hogar? / ¿estás recibiendo almuerzo gratis o a precio reducido? / En el campo marcado ¿Cuánto puede pagar, **Ingrese \$ 0.**

¿Estás experimentando una dificultad financiera? / Continuar

Step 18

You have to Agree to all Waivers in order to complete the registration process.

Waivers

Agreement / Woburn Fall 2018 Session 1

I hereby give The First Tee of the Triangle, Headquarters Office and participating agencies permission to use film, videotape and/or photographs of the above mentioned minor for lawful promotional or informational purposes.

I Agree

I, the parent/legal guardian of the above named youth, give approval for participation in The First Tee of Triangle sponsored activities during calendar year 2018. I assume all risks of injury, illness, and agree to hold harmless The First Tee of the Triangle and Headquarters Office from claims of any nature arising from any activity, including transportation, connected with The First Tee of the Triangle program. This hold harmless agreement includes, but is not limited to, any claim due to injury, illness, or death, arising from negligence of The First Tee of the Triangle or Headquarters Office, its employees, agents, LPGA and PGA Professionals, participating agencies, and volunteers. I consent to The First Tee of the Triangle and Headquarters Office communicating information regarding my child's participation via the internet. This consent form is valid for all activities of The First Tee of Triangle for the calendar year of 2018.

I Agree

In the event that I cannot be reached in an emergency, I agree to authorize any and all determinations of need for medical assistance and/or administration of medical attention deemed necessary by The First Tee of the Triangle representatives. I hereby give permission to the medical personnel selected by The First Tee of the Triangle representatives to secure any and all medical, hospitalization, dental, and/or surgical treatment in event that a medical attention is needed from a healthcare provider, as such shall be the responsibility of the parent or guardian.

I Agree

BACK

CONTINUE

Renuncias

Debe aceptar todas las exenciones para completar el proceso de registro. / Continuar

Por la presente doy el primer tee del triángulo, permiso de la sede central para usar película, cinta de video o fotografía del menor mencionado anteriormente para fines legales promocionales o informativos - *estoy de acuerdo*

Acepto - Por este medio, doy permiso al First Tee del Triángulo, la oficina central y las agencias participantes para utilizar película, cinta de video y / o fotografías del menor mencionado anteriormente con fines legales promocionales o informativos.

Acepto - Estoy de acuerdo - Soy el padre / tutor legal del joven antes mencionado, doy mi aprobación para participar en actividades patrocinadas por The First Tee of Triangle durante el año calendario 2018. Asumo todos los riesgos de lesión y acepto eximir de responsabilidad The First Tee of The Triangle y la oficina central de reclamos de cualquier naturaleza que surjan de cualquier actividad, incluido el transporte, conectado con la instalación o programa de First Tee. Este acuerdo inofensivo incluye, pero no se limita a, cualquier reclamo debido a una lesión que resulte de la negligencia de The First Tee de Triangle o la Oficina Central, sus empleados, agentes, profesionales de LPGA y PGA, agencias participantes y voluntarios. Doy mi consentimiento para que First Tee of the Triangle y la oficina central comuniquen información sobre la participación de mi hijo a través de Internet. Este formulario de consentimiento es válido para todas las actividades de The First Tee of the Triangle para el año calendario de 2018.

Acepto - En caso de que no se pueda comunicar con usted en caso de emergencia, acepto y acepto todas las determinaciones de necesidad de asistencia médica y / o administración de atención médica que los Representantes de The First Tee consideren necesarias. Doy permiso al personal médico seleccionado por The First Tee Representatives para asegurar cualquier tratamiento médico, de hospitalización, dental y / o quirúrgico. En caso de que se necesite dicha atención médica de un proveedor de atención médica, todos los costos serán responsabilidad del padre o tutor.

Step 19

Session Registration(s)

Participant	Program	Program Dates	Price	Discounts	Remove From Cart
[Redacted]	2014-2015 [Redacted]	[Redacted]	[Redacted]	\$ 1.00	X

Click to Modify Contact Info

Main Contact

Please confirm the accuracy of the following information.

* Field is required.

* Any one of the three phone numbers must have a value.

First Name *

Last Name *

Address *

City *

State *

Zip *

Home Phone *

Mobile Phone *

Work Phone *

Mobile Phone Provider

Email *

What is your preferred method of contact?

None

Payment Summary

Session Total

\$ 0.00

Discounts

Financial Aid Requested?

Click to Add Item

Click to Remove Item

SUBMIT REGISTRATION

Registro de Sesión

No soy un robot / enviar registro /

Contacto Principal

nombre de pila / apellido / calle / ciudad / estado / código postal / teléfono móvil / dirección de correo electrónico / cual es su método preferido de contacto

Step 20 – Finished!

Write down your reservation number, just in case!

< CURRICULUM AND EVENTS

< ADD A PARTICIPANT

EVENT REGISTRATION

SESSIONS

CONTACT INFO

PARTICIPANT
QUESTIONS

FINANCIAL AID

WAIVERS

SUMMARY

CONFIRMATION

Congratulations, your transaction has been successfully processed!

Your reservation number is: **FA-00XXXX**

[GO TO CURRICULUM AND EVENTS](#)

Escriba su número de reserva por si acaso!

Felicidades, su transacción ha sido procesada exitosamente!

Su número de reserva es : xxxxxxx

